



**ASIIN Seal**

**Accreditation Report**

**Bachelor's Degree as  
Medical Surgeon and Obstetrician**

Provided by  
**Facultad de Medicina,  
Universidad Autónoma de Nuevo León**

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## A About the Accreditation Process

Name of the degree programme (in original language)	(Official) English translation of the name	Labels applied for <sup>1</sup>	Previous accreditation (issuing agency, validity)	Involved Technical Committees (TC) <sup>2</sup>
Licenciado de Médico Cirujano y Partero	Bachelor's Degree as Medical Surgeon and Obstetrician	ASIIN	-	14
<p><b>Date of the contract:</b> 31.05.2019</p> <p><b>Submission of the final version of the self-assessment report:</b> 08.10.2019</p> <p><b>Date of the onsite visit:</b> 05.11. – 07.11.2019</p> <p><b>at:</b> Monterrey, Nuevo León, México</p>				
<p><b>Peer panel:</b></p> <p>Prof. Dr. Beate Brand-Saberi, Ruhr University Bochum</p> <p>Prof. Dr. José M. Peinado Herreros, University of Granada</p> <p>Dr. Daniel Ekhart, Frankfurt</p> <p>Irais Flores Romero, Universidad Autónoma de Ciudad Juárez, Mexico</p>				
<p><b>Representative of the ASIIN headquarter:</b></p> <p>Rainer Arnold</p>				
<p><b>Responsible decision-making committee:</b></p> <p>Accreditation Commission for Degree Programmes</p>				
<p><b>Criteria used:</b></p> <p>European Standards and Guidelines as of 15.05.2015</p> <p>ASIIN General Criteria as of 28.03.2014</p>				

<sup>1</sup> ASIIN Seal for degree programmes;

<sup>2</sup> TC: Technical Committee for the following subject areas: TC 14 – Medicine

## B Characteristics of the Degree Programmes

a) Name	Final degree (original/English translation)	b) Areas of Specialization	c) Corresponding level of the EQF <sup>3</sup>	d) Mode of Study	e) Double/Joint Degree	f) Duration	g) Credit points/unit	h) Intake rhythm & First time of offer
Medical Surgeon and Obstetrician	Bachelor of Science (B.Sc.)	-	6	Full time	no	12 Semester	339 credits (339 ECTS)	February and August

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<sup>3</sup> EQF = The European Qualifications Framework for lifelong learning

For the Bachelor's degree programme Medical Surgeon and Obstetrician UANL has presented the following profile on its webpage:

„Train health professionals with academic excellence in the field of undergraduate studies, researchers, specialists, masters, doctorates, university professors, technicians and other staff required in the various disciplines of the medical sciences, so they can develop their health care, teaching and research duties within an ethical and humanitarian frame, an ample spirit of service, self-criticism and continual updating of their knowledge.”

## C Peer Report for the ASIIN Seal

### 1. The Degree Programme: Concept, content & implementation

**Criterion 1.1 Objectives and learning outcomes of a degree programme (intended qualifications profile)**

**Evidence:**

- Competence-Module-Matrix
- Self-Assessment Report
- Curricular Map
- Module descriptions
- Webpage: <https://www.uanl.mx/en/oferta/bachelor-of-medicine-surgery-and-midwifery/>
- Discussions during the audit

**Preliminary assessment and analysis of the peers:**

The peers refer to the submitted Self-Assessment Report and Competence-Module-Matrix as a basis for judging whether the intended learning outcomes of the Bachelor's degree programme Medical Surgeon and Obstetrician (MCP) as defined by UANL correspond with the competences as outlined by the ASIIN criteria for programme accreditation. In addition, the qualification objectives are also mentioned in the Diploma Supplement specific to the degree programme. The peers come to the following conclusions:

Graduates of the MCP programme should be competent physicians who are able to solve main health problems in primary care. They should acquire the necessary skills and knowledge to treat individuals and to work in a community or team from a psychosocial perspective with high ethnic morals. In addition, graduates should be willing to further pursue their medical education, have acquired basic research skills, and be capable of generating medical knowledge with social responsibility. Furthermore, they should understand the relation between health and diseases, be able to diagnose and solve health problems, and promote health in their community.

The peers see that graduates of the MCP programme acquire the necessary subject-related competences, such as a sound knowledge of the natural sciences, in-depth

knowledge and methodological competence in medical sciences and are also able to apply this in other contexts. Furthermore, they are able to solve subject-relevant problems, can present the results, have trained their analytical and logical abilities, and have an awareness of possible social, ethical and environmental effects of their actions. During the course of their studies, the students have also acquired communicative skills, can work in a team, and have developed a strategy for life-long learning. The intended learning objectives are accessible to all stakeholders via the university's webpage.

Due to their broad medical background, graduates of the MCP programme are able to work in various areas of the public and private sector for example as medical consultants in health institutions or hospitals.

Overall, the peers hold the opinion that the intended learning outcomes of the MCP programme are well defined and meaningfully formulated and that both professional and interdisciplinary aspects are sufficiently represented. The career perspectives mentioned are assessed as realistic and appropriate. In principle, the listed objectives can be assigned to level 6 (Bachelor's degree programmes) the European Qualifications Framework (EQF/EQF). The peers thus confirm that the objectives and learning outcomes of the MCP programme adequately reflect the desired academic qualification level and satisfy the ASIIN criteria for programme accreditation.

<b>Criterion 1.2 Name of the degree programme</b>
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**Evidence:**

- Self-Assessment Report

**Preliminary assessment and analysis of the peers:**

As explained in the Self-Assessment Report, "In 1883, the degree was formally established. It implied not only practical medicine but also dealing with obstetrics problems, for instance, the use of forceps, carrying out surgical procedures. In 1910, the concept of Medical Surgeon and Obstetrician referred to a professional who had knowledge in basic sciences, such as anatomy, histology, clinical and therapeutic studies, surgical and obstetric skills."

Understanding that the MCP programme has a very long tradition in Mexico, the peers hold the view that the neither the English translation nor the original Spanish name do not correspond with the current content. For example, in Mexico the predominant name is „Medico Cirujano“ (degree in medicine and surgery, according to COMAEN), but also in the rest of the word. The peers believe that the name should be updated, even more con-

sidering that pregnancy and delivery, although could be attended by a general physician, is mainly part of the medical specialty obstetrics and gynaecology.

The content of the MCP programme has significantly changed since the end of the 19th century, so it would be more adequate to change the English name into “Medicine” or “Médico” in Spanish. The same problem is relevant for several other medical programmes in Mexico and it would be useful to apply a common term for all medical programmes in Mexico. Since the peers understand that the MCP programme has a long tradition and the name is well established in Mexico, they suggest, as a compromise, to keep the original Spanish name “Licenciado de Médico Cirujano y Partero” (although Médico would be more appropriate) and to change the English translation into “Degree in Medicine”.

### Criterion 1.3 Curriculum

#### Evidence:

- Competence-Module-Matrix
- Self-Assessment Report
- Curricular Map
- Module descriptions
- Webpage: <https://www.uanl.mx/en/oferta/bachelor-of-medicine-surgery-and-midwifery/>
- Discussions during the audit

#### Preliminary assessment and analysis of the peers:

The MCP programme has two intake terms: spring: January – July and fall: August – December. The spring semester starts in the first week of February and ends in the fourth week of June; the fall semester runs from the first week of August to the third week of December.

The School of Medicine has attached a comprehensive Competence-Module-Matrix to the Self-Assessment Report, showing which learning outcomes are to be achieved by which module. The matrix makes clear how the desired qualification areas (scientific base of medicine, professional clinical practise, critical thinking and research, professional values and ethics, organisational work, personal and professional development, communication, and social commitment) are concretely implemented in the MCP programme, so that the peers can understand which knowledge and skills the students should acquire.

<b>Criterion 1.4 Admission requirements</b>
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**Evidence:**

- Self-Assessment Report
- General Regulations on the Procedures for Admission and Permanence of Students
- Regulation on Bachelor's degree entrance examination

**Preliminary assessment and analysis of the peers:**

According to the Self-Assessment Report, the admission procedures and policies for new and returning students are defined in the General Regulations on the Procedures for Admission and Permanence of Students. This regulation is published on UANL's webpage and thus accessible for all stakeholders.

All high school graduates applying for studying at a university in Mexico are required to take the National Enrolment Exam (EXANI II), which is implemented by the National Centre for Educational Evaluations (CENEVAL). This exam consists of a general part that is relevant for all degree programmes, an English Language section, and a subject-specific part that differs for the different scientific areas. For the MCP programme, the School of Medicine included the Health Test section that deals with Chemistry, Biology, and English as a foreign language. New students must register online for taking part at the EXANI II, which is conducted at the university where the student wants to study. The School of Medicine accepts or rejects applicants based on their EXANI II score.

The details of the application process at UANL and further information on admissions criteria and deadlines can be found in the Regulation on Bachelor's degree entrance examination, which is also published on the university's webpage.

In the last five years, the number of students applying for the MCP programme and the number of accepted students has remained nearly constant. In spring term, there are around 2600 applicants, of which between 850 and 1000 are accepted. The number of applications in the fall semester is significantly higher, here the School of Medicine receives between 4750 and 5050 application, of which between 950 and 1150 are accepted. As a result, the acceptance rate is significantly higher in the spring semester (~ 34 %) than in the fall semester (~ 20 %). The average number of applicants during the last five terms is 3683.

Since the high school graduates leave school in summer, the fall semester has usually a higher number of applicants than the spring semester. The Dean points out that the required minimum score in the National Enrolment Exam for the MCP programme is very

high in comparison to other universities and other programmes so that the School of Medicine only accepts very qualified high school graduates.

In summary, the peers find the terms of admission to be binding and transparent. They confirm that the admission requirements support the students in achieving the intended learning outcomes.

**Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 1:**

The peers appreciate that the Faculty of Medicine will follow their suggestions with respect to the name of the degree programme. As the peers proposed, the original Spanish name “Licenciado de Médico Cirujano y Partero” will be kept and the English translation will be officially changed as “Degree in Medicine”. It already appears on UANL’s webpage and it will be used in official documents where this translation is required.

The peers consider the criterion to be fulfilled.

## **2. The degree programme: structures, methods and implementation**

<b>Criterion 2.1 Structure and modules</b>
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**Evidence:**

- Competence-Module-Matrix
- Self-Assessment Report
- Curricular Map
- Module descriptions
- General Rules of International Relations

**Preliminary assessment and analysis of the peers:**

The MCP programme is offered by the School of Medicine. The peers confirm that the curriculum is competence-based. In total, the MCP programme consists of 339 ECTS credits in 12 semester; a single semester comprises 18 weeks of classes and 2 weeks for final examinations. The new curriculum (put into effect in 2015) is divided into five areas:

<b>ACFB</b>	<b>BASIC</b>
<b>ACFP-F</b>	<b>ESSENTIAL PROFESSIONAL</b>
<b>ACFP-I</b>	<b>INTEGRATIVE PROFESSIONAL</b>
<b>ACFGU</b>	<b>GENERAL STUDIES</b>
<b>ACFGU-MCP</b>	<b>GENERAL STUDIES MCP</b>

Courses in General Studies are compulsory parts of each undergraduate programme at UANL and include the following four modules: „Leadership, Entrepreneurship and Innovation“, „Social Responsibility and Sustainable Development“, „Ethics and Culture of Legality“, „Psychology and Professional Development“, and „Peace culture“. Each of the 4 General Studies courses encompasses 2 ECTS. The purpose of the GS courses is to develop social commitment while acquiring professional skills that are demanded by the labour market.

Electives are offered in the area General Studies MCP (4 modules), in which the students can choose between different small medical subjects and languages (3 ECTS per elective) such as: „Strategies and Study Habits in Health Sciences“, „English“, „Technical English“, or „Application of Information and Communication Technologies in Health Sciences“.

Basic Science courses are introductory classes that impart the necessary skills and knowledge in biosciences (Microbiology, Molecular Biology, Biochemistry, Cell and Tissue Biology, Bioethics, and Biostatistics) as well as in basic medical sciences (Embryology, Physiology, Anatomy, Genetics, Immunology, and Preventive Medicine). The Basic Science courses cover the main part of the first two years in the MCP programme.

The Essential Professional courses are offered in the third year of studies and build a bridge between the pre-clinical and the clinical studies. They include modules such as: „Pharmacology and Toxicology“, „Pathology“, „Forensic Medicine“, „Quality and Safety in Health Care“, „Imaging“, and „Medical Propaedeutic“. In this area two electives are offered, one in each semester of the third year.

Courses in the area of Integrative Professional are introduced from the seventh semester of the MCP programme through students' exposure to the clinical setting and through the provision of a well-supported clinical environment. Bedside teaching in small groups as well as simulation equipment are used to make students familiar with the application of clinical sciences.

Supplementing the lectures, Undergraduate Rotate Internships (clinical skills sessions, simulation sessions and case-based scenarios) are conducted during the clinical years (fourth, fifth and sixth year) of the MCP programme. Students are required to attend clinical placements on rotation basis in the specialties such as Surgery, Emergency Medicine,

Gynaecology and Obstetrics, Paediatrics, Otorhinolaryngology, Ophthalmology, Neurosurgery, Endocrinology, Gastroenterology, Haematology, Cardiology, Nephrology, Pulmonology, Rheumatology, Allergy, Dermatology, Infectiology and Neurology.

The Undergraduate Rotating Internship provides structured and supervised professional experience in the University Hospital as well as in hospital and clinics belonging to the Ministry of Health. The internship offers hands-on training (under supervision of staff members) in order to gain the necessary clinical experience. In the course of the MCP programme, the number of practical hours increases, as the semesters progress. This ensures that students acquire, in addition to the theoretical knowledge, the necessary practical skills and abilities to perform effectively in health care areas.

Upon admission, students have to take an English proficiency test. Based on the result, they are assigned to English courses, that are offered by the Self-Access Learning Center (CAADI) promotes foreign language learning. CAADI also offers additional voluntary classes in several other languages.

After finishing their sixth year, all medical students in Mexico must complete the yearlong “Social Service as a graduation requirement. According to the Self-Assessment Report, „the purpose of Social Service is to foster learning environments linked with the actual exercise of their profession profile in which they are immersed, which provide services for the benefit of society, the state and the university community“. The peers discuss with the students, about the content and organisation of the “Social Service“. They learn that the “Social Service“ is organised in coordination with the Ministry of Health within the State of Nuevo Leon. It is designed to train undergraduate students, who have completed all of their modules, in the prevention, timely diagnosis, and management of the most frequent pathologies in primary care. “Social Service“ is considered as a year of professional training and it is a mandatory requirement for obtaining the Diploma and a professional license. The Department of Social Service of the School of Medicine is in charge of assigning students to hospitals or clinics, as well as supervising and guiding them throughout the year.

While analysing the new curriculum, the peers determine that the clinical modules “Medical Sciences I, II, III” and “Surgical Sciences I, II, III” lack inner coherence and are not integrated learning and teaching units. Instead, they consist of self-contained subjects such as Cardiology, Nephrology, Pulmonology, Rheumatology, Geriatrics, and Oncology in the case of “Medical Sciences II” and subjects such as Plastic Surgery, Urology, and Traumatology in the case of “Surgical Sciences II“. The programme coordinators confirm that these are self-standing subjects with independent exams. For this reason, the peers expect that the aggregated modules Medical Sciences I, II, III and Surgical Sciences I, II, III be

split into their components. This will also make transparent, how much workload is assigned to each of these subjects.

The peers especially appreciate the combination of university and university hospital with an intertwined practical education during the clinical years. The students confirm this positive impression and emphasize that the MCP programme has a very good reputation and is “one of the best medical programmes in Mexico”. The close interlocking with clinical practise is supported by the part time professors, which work as teachers at the School of Medicine as well as physicians in hospitals or private doctor’s offices.

The peers discuss with the programme coordinators, how undergraduate students can participate at research activities. They learn that the Department for Research is in charge of coordinating, supporting, promoting, and facilitating research activities. It offers a program called BP Invest (Undergraduate Scholarship Holder devoted to Research), by which students can get involved with research activities. Several of the students confirm during the discussion with the peers that they are involved in research projects, usually together with a professor and a graduate student (including publications). However, it is voluntary.

According to the opinion of the peer group, the most critical aspect of the MCP programme is the fact that there is no compulsory Bachelor’s thesis or a final individual project within the curriculum. Since all students have a course on scientific methods and learn how to prepare a research project, taking the next step and requiring all students to conduct a small project would be possible.

As the programme coordinators confirm during the audit that the students can get involved in research activities (e.g. via the BP invest programme) but it is voluntary. The peers understand that it is difficult to find suitable topics for all students and that some of the students are not focused on research activities. Nevertheless, the peers expect the School of Medicine College introduces a compulsory final project, either in the form of a Bachelor’s thesis or of a research oriented final project. They also point out that the project should be documented by a written report and possibly an oral presentation, which ensures that the students work on a set task independently and at the academic level aimed for.

Finally, the peers emphasise that from their point of view the graduates of the MCP programme acquire skills, knowledge and competences above the Bachelor level. Graduates are well prepared to work as physicians without further academic education and to enter a specialty training/residency, i.e. internal medicine, radiology etc. In comparison to other countries e.g. to Germany the graduates are as qualified as graduates of a degree programme with a state examination. Consequently, the peers consider the degree programme to be underrated; it is more similar to a graduate programme. Therefore, the

School of Medicine should think about awarding a “Medical Doctor”. Even a Master’s degree could be awarded, if the research activities would be increased and become a compulsory part of the curriculum. A Bachelor’s degree could be awarded after three years of premedical and basic medical studies. This would offer the graduates the opportunity to receive an internationally recognised graduate degree that would allow them to join a PhD programme or a residency / speciality training abroad.

### *International Mobility*

As mentioned in the Self-Assessment Report, students have the opportunity to conduct a study abroad term based on inter-university collaboration agreements. The credits obtained are transferred once the student has finished the academic cycle abroad (1 or 2 semesters). So far, the School of Medicine has established international exchange programmes with the University of Cologne and the Université Catholique de Lille. An additional student mobility programme for undergraduate students involves carrying out clerkships in hospitals. Placements are available in more than 50 countries through the International Section of Undergraduate Students (SINESP). At the same time, international students come to the School of Medicine for clinical rotations. The School of Medicine provides housing to foreign students who take part in this programme.

The students confirm during the discussion with the peers that opportunities for international academic mobility exist and that the exchange programme with Lille has been recently established. However, they also point out that they wish for more places, more exchange programmes, and more scholarships. The School of Medicine supports the students in organizing a stay abroad by providing scholarships, language courses, and advice. For example, there is a coordinator for academic mobility at the School of Medicine. The peers appreciate the efforts to foster international mobility and support the School of Medicine in further pursuing this path. However, the students’ academic mobility is limited by the small number of existing exchange programmes (for semester-long or year-long stays abroad). For this reason, the peers strongly recommend establishing more international exchange programmes.

Modules or courses taken at any UANL educational programme different from the one offered by the MCP programme or in any other National or International University can be transferred to the programme as it is stated in Article 29 of UANL’s General Regulations.

<b>Criterion 2.2 Workload and credits</b>
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**Evidence:**

- Self-Assessment Report

- Curricular Map
- Module descriptions
- Discussion during the audit

**Preliminary assessment and analysis of the peers:**

According to the statistical data (academic progress, failure and graduation rates) mentioned in the Self-Assessment Report and additional information provided during the audit, the average time for the students to complete their studies is eight years. Considering that the minimum duration of the curriculum is six years and an additional year for social service, the peers judge this period to be acceptable.

The peers appreciate that UANL applies a credit point system that is aligned to the European Credit Transfer System (ECTS). According to the UANL credit system, 30 hours of student workload (including lecture hours and self-study hours) are equivalent to 1 credit point, which is in accordance with ECTS. The peers confirm that the workload in hours is indicated in the module descriptions and the distinction between classroom work and self-studies is made transparent.

The peers discuss with the programme coordinators and the students whether the estimated workload for self-studies is realistic or not. They learn that so far there has been no survey asking the students to evaluate the amount of time they spent outside the classroom for preparing the classes and learning for the exams. Since the peers gain the impression that the estimated workload for self-studies is too low in comparison to the actual time needed by the students, they suggest asking the students directly about their experiences. This could e.g. be done by including a respective question in the course evaluations. The peers point out that the School of Medicine should follow the ECTS users' guide, while determining the students' total workload. This is the time students typically need to complete all learning activities (such as lectures, seminars, projects, practical work, self-study and examinations).

In other words, a seminar and a lecture may require the same number of contact hours, but one may require significantly greater workload than the other because of differing amounts of independent preparation by students. Typically, the estimated workload will result from the sum of:

- the contact hours for the educational component (number of contact hours per week x number of weeks)
- the time spent in individual or group work required to complete the educational component successfully (i.e. preparation beforehand and finalising of notes after attendance at a lecture, seminar or laboratory work; collection and selection of relevant ma-

terial; required revision, study of that material; writing of papers/projects/dissertation; practical work, e.g. in a laboratory)

- the time required to prepare for and undergo the assessment procedure (e.g. exams)

Since workload is an estimation of the average time spent by students to achieve the expected learning outcomes, the actual time spent by an individual student may differ from this estimate. Individual students differ: some progress more quickly, while others progress more slowly. Therefore, the workload estimation should be based on the time an “average students” spends on self-studies and preparation for classes and exams. The initial estimation of workload should be regularly refined through monitoring and student feedback.

The peers ask the programme coordinators if they have detailed statistical data concerning the dropout rates. They learn that the dropout rate is rather high for a medical degree programme. Only around 300 to 400 out of 1000 newly admitted students per semester advance to the clinical years and subsequently graduate from the School of Medicine. Most dropouts occur in the first semesters when students realise that medicine is not the right degree programme. Other students leave the MCP programme for economic reasons, because they cannot afford the tuition fees and living expenses.

Asked about the reasons for dropping out the students elaborate that financing the studies is an important issue, because some students run out of money. Also new students are often unsure about what to study and their expectations of the specific degree programme were not realistic; after one or two semesters at the university they realise that they made the wrong decision and drop out of the degree programme. Moreover, new students are often not mature enough and the transition from high school education to university education is a big challenge for them. Finding a new social environment and coping with organising themselves overstrains many students, especially in such a long and hard programme as the MCP programme. Finally, students frequently underestimate the necessary scientific background and that a lot of work and effort is necessary to finish a degree programme in the area of medical sciences successfully. The peers can follow this line of argumentation but still judge the dropout rates to be very high. For this reason, they strongly recommend putting more effort into analysing the reasons for dropping out in order to be able to take appropriate measures for reducing the quota.

Based on the curricular map and the comments of the students, the peers conclude that there is no structural pressure on the quality of teaching and the level of education due to the workload. The students express their general satisfaction with the amount and the distribution of their workload.

<b>Criterion 2.3 Teaching methodology</b>
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**Evidence:**

- Self-Assessment Report
- Curricular Map
- Module descriptions
- Discussions during the audit

**Preliminary assessment and analysis of the peers:**

In course of the MCP programme, several different educational methods are applied: oral presentations, clinical case discussions, research projects, team problem solving, laboratory work, simulation activities, physical examination of patients, clinical practice, rotating internship, and lectures.

During the classes, active and interactive teaching methods (e.g. lectures, discussions, reports, presentations, and group work) are applied. UANL wants to encourage the students to gain knowledge from different scientific areas and wants them to be able to solve specific problems through an interdisciplinary approach. This should ultimately contribute to the transition from a teacher centered to a student oriented teaching method. In order to involve all students in the learning process and to develop their thinking and analytical skills, the teaching staff uses several methods of training and gives assignments on different levels of complexity. In general, maintaining a balance between hours devoted to class work and to either lab or clinical practice increases the students' ability to learn and to gain knowledge.

While visiting the seminar rooms and lecture halls during the audit, the peers notice that students are broken down in smaller learning groups of 30 to 40 students for teaching and laboratory work. Only in the clinical years, classical lectures are offered. Coordinating the different professors and learning groups in the first semesters, (e.g. in Embryology) is a challenge for the programme coordinators. However, small group teaching intensifies the interaction with the professor and is much more personal than a classic lecture. As result, the courses in the first two years are more similar to a seminar where students discuss with their professor. At the same time, the theoretical content of each course is provided via a recorded lecture, which can be accessed by all students via UANL's electronic learning platform. In addition, advanced students are instructing younger students and thus are supporting the professors. The peer group appreciates the concept of small group and peer teaching.

The students point out during the discussion with the peers that they are divided into small groups during the clinical rotations. Since UANL it is a public university with a public

hospital, students have a lot of contact with patients from low-income groups and get a lot of practical experience, especially in obstetrics they get a lot of hands-on experience in delivering babies.

The peers confirm that the MCP programme is based on competences and student-centered learning and teaching. The main “pillars” that constitute the pedagogical basis of the degree plan are meaningful learning and the ability of learning to learn. The peers appreciate that students can directly apply their knowledge and skills in a real context in the University Hospital. As a result, students learn about clinical problems and the management of all kinds of laboratory techniques that they can observe and practise in the University Hospital under the continuous supervision of staff members.

In summary, the peer group judges the teaching methods and instruments to be suitable to support the students in achieving the intended learning outcomes.

#### **Criterion 2.4 Support and assistance**

##### **Evidence:**

- Self-Assessment Report
- Discussions during the audit

##### **Preliminary assessment and analysis of the peers:**

The School of Medicine offers a comprehensive support system for all students; it includes consultations with tutors on the curriculum, individual study progress, and personal matters. Tutors also provide educational support to their assigned students to improve their academic performance and motivate them to participate in the social life of the university. The role of the tutor is to help the students with the process of orientation during the first semesters, the introduction to academic life and the University’s community, and to respond promptly to any questions. They also offer general academic advice, make suggestions regarding relevant careers and skills development and help if there are problems with other teachers. The students confirm during the discussion with the peers that they all have a tutor, who they can contact and ask for help or advice.

In addition, students can contact their professors at any time for help with academic questions. They are available to answer any questions about the degree programmes and provide advice on individual modules as well as on the necessary tasks or reports. All professors offer fixed office hours and can be contacted by e-mail outside these hours.

Each department of the School of Medicine has the option to offer supplementary academic workshops for students that have failed exams or have problems with some topics.

Participating at these workshops, although they are not mandatory, has helped students to return to a regular status. This has reduced the number of students with credit deficits.

The peers learn during the discussion with the students that there are numerous student clubs at UANL where extracurricular activities (e.g. sports, singing, dancing, theatre, debating, languages etc.) can be pursued. UANL actively promotes and supports these activities by providing premises and financial resources.

The peer group confirms that sufficient resources are available to provide individual support and advice to all students, helping them to achieve the desired learning outcomes and to complete their studies successfully and without delay.

**Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 2:**

The peers support Faculty of Medicine's plan to split the clinical modules "Medical Sciences I, II, III" and "Surgical Sciences I, II, III" into their components as suggested. This way, the workload assigned to each of these subjects will be specified more accurately.

The peers acknowledge that a compulsory final individual project in the form of a research-oriented final project, specifically, as a part of the Social Service will be introduced into the curriculum. The project will be documented by a written report. This will be effective when students of the intake year 2015 start their Social Service.

Since changes in the curriculum map are first submitted to the Academic Committee of the School of Medicine, and then need to be approved by the Academic Committee of the University Council, it will take some time to put these changes into effect. The peers expect that the new curriculum will be submitted in the course of the fulfilment of the requirements.

The peers see that Faculty of Medicine will include a question in the course evaluation survey about the amount of time students spent outside the classroom for preparing classes and learning for exams. This will be a valuable indicator for adequately estimating the workload for self-studies. The result of the surveys and the adjusted workload overview should be submitted in the further course of the accreditation procedure.

It is appreciated by the peers that the Faculty of Medicine will establish a new exchange programme with the University of Toulouse and is planning to further increase the number of international agreements. The peers consider this a first step in the right direction and encourage the Faculty of Medicine to further pursue this path.

The Faculty of Medicine agrees with the peers that it is useful to analyse in more detail the reasons for drop-ping out and to take appropriate measures for reducing the quota.

For this reason, the Faculty of Medicine will ask students who want to leave the programme to complete a newly designed survey, which should produce detailed information on the reasons for dropping out. Subsequently, appropriate measures for reducing the quota can be taken. The peers support this plan.

The peers consider the criterion to be mostly fulfilled.

### 3. Exams: System, concept and organisation

#### Criterion 3 Exams: System, concept and organisation

##### Evidence:

- Self-Assessment Report
- Module descriptions
- General Regulation of Exams
- Discussions during the audit

##### Preliminary assessment and analysis of the peers:

Academic performance is graded on a scale from 0 to 100. At the end of each semester, the students must obtain a minimum of 70 points in order to get a passing grade. The form of each examination is provided to the students via the module descriptions that are available on the school's website.

As detailed in the General Regulations, the final grade of the module is not only based on a single exam, but on a range of evaluation methods such as such clinical laboratory performance, diagnostic and therapeutic procedures, case-based exams, written and oral examinations, presentations and the Objective Structured Clinical Examination (OSCE).

If a student fails a module, he has a total of six opportunities to pass the module. The further details are determined in UANL's General Regulations.

In addition to passing all courses and completing the Social Service, students must demonstrate their English proficiency. They also have to take a nation-wide medical certification test called EGEL-MEDI. This test is used for comparing and evaluating the quality of the graduates from the different medical programmes in Mexico. The School of Medicine has developed an online course for preparing for the EGEL-MEDI. The peers learned that this exam is not mandatory for students, although it gives information about the quality of the students at a national level

The peers discuss with the students how many and what kind of exams they have to take each semester or during/after each phase. They learn that for each class there is one final exam, several sub-exams, and usually additional practical exams or oral presentations. The final grade is the sum of all exams. The exams at the end of each phase are shorter than a final exam for the whole class at the end of the semester would be. The students appreciate that there are a several short exams instead of one big exam and confirm that they are well informed about the examination schedule, the examination form and the rules for grading. The students add the information that most modules also include presentations and laboratory work.

The peers confirm that there is a form of assessment for each course and that all students are well informed about the form of assessment and the details of what is required to pass the module. The rules for re-sits, disability compensation, illness, appealing, and other circumstances are written down in UANL's General Regulation of Exams and therefore transparent to all stakeholders.

As mentioned before under crit. 2.1, the peers expect that part of the compulsory curriculum should be an individual final project, the result of which should be documented in the form of a written report and an oral presentation. This report is usually called "Bachelor's thesis". Projects leading to the Bachelor's thesis could well involve teamwork or could be done in the course of a research project. Putting a stronger emphasis on research activities and involving all Bachelor's students is an important aspect if the School of Medicine wants to increase its research activities and become internationally more visible.

The peers also inspect a sample of examination and research papers and are overall satisfied with the general quality of the samples.

The peers come to the conclusion that besides the critical issue of an only optional Bachelor's thesis the criteria regarding the examinations system, concept, and organization are fulfilled and that the examinations are suitable to verify whether the intended learning outcomes are achieved or not.

**Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 3:**

As mentioned under criterion 2, the peers expect the Faculty of Medicine to submit a verification for introducing a compulsory final project in the further course of the accreditation procedure.

The peers consider the criterion to be mostly fulfilled.

## 4. Resources

### Criterion 4.1 Staff

#### Evidence:

- Self-Assessment Report
- Staff handbook
- UANL General Regulations
- Discussions during the audit

#### Preliminary assessment and analysis of the peers:

According to the Self-Assessment Report, the teaching staff at the School of Medicine encompasses 592 teachers, 383 of them are full-time professors, and 209 are part-time professors or professional staff members (some of them are in the process of getting a promotion once they fulfil the university's requirements to obtain their recognition as full-time professors). A fourth category consists of the professors who are in charge of the GS modules. The title "professor" is awarded to every teacher that gives a class at UANL no matter what academic qualification he possesses. Most professors have a PhD; several have a Master's degree or are medical specialists.

The peers discuss with the Dean, how the School of Medicine hires new staff members. They learn that the Heads of Department submit a request to hire new staff members or to fill a vacancy to the Dean of the School of Medicine who needs to approve the requests. Most of the time, they propose a candidate that they know personally from their residency; other vacancies (e.g. Head of Department) are announced publicly. Consequently, most of the professors at the School of Medicine are graduates of UANL. During the discussion with the teachers, the peers learn that there are four different positions for professors (A, B, C, and D). With each promotion the salary rises, although the teaching load and other responsibilities (advising, administration) stay the same. Criteria for promotions are quality of teaching, of provided clinical services, and conducted research activities conducted (published papers). Every promotion needs to be approved by the School of Medicine; the details are described in the university regulations.

The provided staff handbook includes detailed descriptions of the qualification profile of the members of the teaching staff; the peers confirm that the composition, scientific orientation and qualification of the teaching staff are suitable for successfully implementing and sustaining the degree programme. In addition, they see that there are enough professors for adequately implementing the MCP programme and that they have appropriate specialisation to fulfil the needs of the different areas of the curriculum. Most of the

teaching staff is devoted to teaching, research, and assistance in the hospital on a daily basis.

#### **Criterion 4.2 Staff development**

**Evidence:**

- Self-Assessment Report
- Staff handbook
- Discussions during the audit

**Preliminary assessment and analysis of the peers:**

UANL encourages the training of its academic staff so it has developed a programme for improving the didactic abilities and teaching methods. According to the Self-Assessment Report, UANL has developed a Teacher Updating Programme so that professors can further develop their didactic and professional skills. This programme focuses on the reflection of didactic processes, the exchange of teaching experiences, and further developing teaching methods.

Staff development is an important topic for the School of Medicine and UANL. The Continuing Education Department is in charge of the academic development programme. For fostering their professional academic development and updating their scientific knowledge, professors have the opportunity of attending congresses, seminars, workshops and specialisation activities.

Furthermore, UANL has established the academic incentive programme, which is open to all full-time faculty members. It provides a financial incentive to faculty members. Merits are based on research performance, academic development, students tutoring, teaching evaluations, and awards.

Faculty members are also eligible to apply for graduate studies (Master degrees, Doctoral Degrees, or post-Doctoral degrees) through scholarships offered by federal agencies, or through the University Trust Fund for Scholarships (Fundación UANL).

Finally, full time professors are eligible to apply for sabbatical leave every six years. The purpose of a sabbatical leave is to provide a period of time to carry out research activities for their personal and professional development. Requests for sabbatical leaves should be submitted to the Dean of the School of Medicine for review at least three months prior to the requested leave.

All professors have to attend courses in basic medical teaching other more advanced courses are voluntary. New teaching methods like problem and case based learning are also used. The professors point out that it is especially important to relate with clinical cases so that the students can see the practical application of what they have learned in the theoretical classes.

The peers discuss with the members of the teaching staff the opportunities to develop their personal skills and learn that the teachers are satisfied with the internal qualification programme at UANL.

In summary, the peers confirm that UANL offers sufficient support mechanisms and opportunities for members of the teaching staff who wish to further developing their professional and teaching skills.

#### **Criterion 4.3 Funds and equipment**

##### **Evidence:**

- Self-Assessment Report
- On-site visit of the facilities

##### **Preliminary assessment and analysis of the peers:**

The School of Medicine derives its financial funds from the state (Nuevo Leon), the federal Mexican government, and students' tuition fees. Approximately 75 % of the students at the School of Medicine receive a scholarship (depending on academic achievements, sports or social reasons); regular tuition is 4000 pesos per semester (around €200). Additional funds are raised by research projects that are conducted in cooperation between the School of Medicine and private companies.

As described in the Self-Assessment Report, the School of Medicine has 67 classrooms with a different capacity and are furnished with boards, air conditioning, and audio-visual equipment. For academic meetings in the School of Medicine, 8 auditoriums with a capacity between 180 - 370 persons are available. There is also a multi-purpose hall with capacity for 750 people and 3 computer rooms. The classrooms and auditoriums also have barrier-free access for students with disabilities.

The Center for Evaluation of Medical and Surgical Training (CEVAM) provides a space that allows the evaluation of medical procedures and professional skills, by offering courses such as CPR, First Aid and Emergency Cardiovascular Assistance. It includes an auditorium with a capacity for 50 people, lab equipment, a meeting room with capacity for 20 people, simulated surgery rooms, and doctor's offices. In addition, anatomical and morpho-

logical models can be used there. The Center is divided into different laboratories: computer lab, clinical training lab, surgery lab, and virtual simulation lab. Since these laboratories are used exclusively for teaching, they are fully equipped with the necessary materials and supplies for lab practice as well as internet access, computers, projectors, whiteboards, and air-conditioning.

Funds for research projects are awarded by National agencies such as the National Commission for Research and Technological Development (CONACYT), the Program for Professors' Professional Development (PRODEP), and the Program for the Strengthening of Educational Quality (PFCE), as well as by the School of Medicine, and the university.

The peers confirm that the School of Medicine has facilities and spaces for carrying out all clinical practice required by the MCP programme. In addition to the laboratories of each department, the School of Medicine works with the concept of "School-Hospital", where the University Hospital is the Clinical Department. It provides both primary and specialty care to more than 500,000 patients annually, has 600 beds for inpatient services, 15 surgery rooms, 26 rooms for ambulatory care, a medical imaging area, an emergency area, and specialized labs.

During the audit, the peers also visit the wards, the laboratories, the library, the simulation center, the lecture halls, and the seminar rooms in order to assess the quality of infrastructure and technical equipment. They notice that there are no problems at the School of Medicine with respect to financial or technical resources. During their clinical and lab assignments, medical students are exposed to various clinical settings and all students are given the same exposure opportunities, as they are required to attend the same number of weeks for each respective specialty, through a rotation system.

The peers highlight the modern and comprehensive technical equipment, which is up to international standards and allows for adequately teaching the students.

The School of Medicine has the "Dr. Alfredo Piñeyro López" Library, whose facilities were recently renovated. It has four study areas for consultation of printed and/or electronic documents. The students express their satisfaction with the library opening hours and the available literature. From their point of view, there is sufficient access to current international literature and databases; also a remote access is possible.

In summary, the peers judge the available funds, the technical equipment, and the infrastructure (laboratories, library, seminar rooms etc.) to comply with the requirements for sustaining the degree programme.

**Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 4:**

UANL does not comment on this criterion in its statement.

The peers consider the criterion to be fulfilled.

## 5. Transparency and documentation

### Criterion 5.1 Module descriptions

**Evidence:**

- Self-Assessment Report
- Module descriptions

**Preliminary assessment and analysis of the peers:**

While analysing the provided module descriptions, the peers notice that the students' workload and the awarded credits are not consistent and need to be verified and adjusted (see criterion 2.2). In addition, the exact form of exam should be described in the module descriptions and it should be made transparent how the yes/no evaluation in the practical courses is translated into a grade.

Otherwise, the module descriptions include all necessary information about the module; they are available in Spanish via the school's webpage.

### Criterion 5.2 Diploma and Diploma Supplement

**Evidence:**

- Self-Assessment Report
- Sample Transcript of Records for each degree programme
- Sample Diploma for each degree programme

**Preliminary assessment and analysis of the peers:**

The peer group notices that no Diploma Supplement is issued after graduation. Instead the graduates receive a Transcript of Records (in English) detailing the grades in every course and the overall final grade. The students also receive a diploma that can be included in job applications.

The peers point out that a Diploma Supplement should be issued in Spanish and English and should inform about the structure and content of the respective degree programme. It should provide information about the individual performance as well as statistical data regarding the final grade and information about the composition of the final grade according to the ECTS-Users' guide. This allows the reader to categorise the individual result.

The peers point out that all graduates of the degree programmes must be provided with a Diploma Supplement, it should be automatically issued together with UANL's diploma after graduation. The graduates benefit from this standardised document because this way their academic qualification is more easily recognised abroad, the description of their academic career and the competences acquired during their studies are included, and it offers them easier access to opportunities for work or further studies abroad. Graduation represents the culmination of the students' period of study. The peers confirm that the provided draft is fine.

### **Criterion 5.3 Relevant rules**

#### **Evidence:**

- Self-Assessment Report
- All relevant regulations as published on the university's webpage: <https://www.uanl.mx/en/oferta/bachelor-of-medicine-surgery-and-midwifery/>)

#### **Preliminary assessment and analysis of the peers:**

The peers confirm that the rights and duties of both UANL and the students are clearly defined and binding. All rules and regulations are published on the university website and hence available to all relevant stakeholders.

The only thing the peers find fault with is the fact that the detailed information about the degree programme (curricular map, module descriptions, and learning outcomes) are not available on the School's webpage in English. The peers, therefore, ask the School of Medicine to update the information on the webpage.

#### **Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 5:**

The peers acknowledge that the Faculty of Medicine will update the module descriptions with respect to the students' workload and the awarded credits. In addition, the exact form of exam will be described. Therefore, it will be made transparent, how the yes/no evaluation in the practical courses is translated into a grade. In the following months,

module descriptions including this information will be available in Spanish and in English via the School's webpage.

Furthermore, a Diploma Supplement in Spanish and in English will be automatically issued together with UANL's diploma after graduation once this process is formally established by the Academic Committee.

The peers expect the Faculty of Medicine to submit the updated module descriptions and an exemplary Diploma Supplement in the further course of the accreditation procedure.

The peers consider the criterion to be mostly fulfilled.

## 6. Quality management: quality assessment and development

### Evidence:

- Self-Assessment Report
- Discussions during the audit

### Preliminary assessment and analysis of the peers:

The peers discuss the quality management system at UANL with the programme coordinators. They learn that there is a continuous process in order to improve the quality of the degree programmes and it is carried out through internal and external evaluation. Internal evaluation of the quality of the degree programmes is provided through several surveys. First of all, there is a survey called "Cuestionario de la Evaluación al Desempeño Magistral" that is conducted in all undergraduate and postgraduate degree programmes of UANL. It is organised centrally by the University Evaluation Center with the purpose of evaluating the performance of the teachers. This evaluation takes place in every course and in every semester; it includes ten questions and is done online. As the peers find out during the discussion with the teaching staff and the students, the results of the survey are usually not discussed with the students. The programme coordinators confirm that there is no feedback to the students about the course evaluations. If there is negative feedback, the Dean of the School of Medicine talks to the respective teacher, analyses the problems, and offers guidance. The peers gain the impression that the students' feedback is taken seriously by the teaching staff and changes are made if there is negative feedback but they think it would also be useful to inform the students about the result of the survey.

Furthermore, shortly after graduation UANL conducts a survey to determine the students' level of satisfaction with the respective degree programme. The so called "Graduate Follow-Up Survey" provides feedback, which allows the School of Medicine to determine changes in the job market and to follow their graduates' professional career.

Finally, an employers' satisfaction survey is conducted periodically. The results are taken into account to make adjustments in the modules or the curriculum. During the audit, the employers express their general satisfaction with the qualification profile of the graduates. When they are looking for new employees they prefer graduates of the MCP programme over graduates from other medical programmes, because they consider MCP graduates having good attitudes and competences in relation to clinical practise and patient-orientation.

From the assessed documents as well as the information provided during the on-site visit, the peers can confirm that the UANL in general as well as the School of Medicine in particular has an advanced quality assurance system in place. Annual evaluations of all courses and teaching staff are carried out and the results of the course evaluations are analysed by the curriculum committee. In addition to the survey results, the teaching staff has to provide samples of all student tasks to the committee to allow for a detailed analysis of the achievement of course learning outcomes. The result of the committee's assessment is eventually sent to the teacher as well as the head of the respective department. If the teaching survey reveals any critical points the teaching staff is contacted and respective measures are initiated up to the dismissal of staff members in case of repetitive bad evaluation results. However, the peers realise that the results of the survey and the measures initiated by the committee are not communicated to the students. They have to rely on the assessment of the committee and the willingness of the teacher to adapt to the recommendations given by the committee in case of any issues. Therefore, the peers recommend improving the transparency of the curriculum development process and closing the quality management circle by discussing the survey results with the students. In addition, a student representative should be a member of the curriculum committee. This will increase the students' trust in the quality management processes and increase their willingness to actively contributing to them.

Despite the missing link described above, the peers gained the impression of a well-established quality assurance system where all stakeholder participate in the development of the programme. In addition to the student survey, the programme sustains an intense follow-up of the programme graduates and keeps in active contact with its graduates. In conclusion, it becomes apparent that all stakeholders judge the quality management process to be effective.

The MCP programme has been accredited by the Mexican Board for Accreditation (CO-MAEM), the Mexican Board for Accreditation of Medical Education, and by the Inter-Institutional Committees for the Evaluation of Higher Education (CIEES). It was also included in level 2 in the Record of High Performance Academic Programs-EGEL given by the National Evaluation Center for Higher Education (CENEVAL).

In summary, the peer group confirms that the quality management system is suitable to identify weaknesses and to improve the degree programmes. The students are involved in the process but not all feedback loops are closed.

**Final assessment of the peers after the comment of the Higher Education Institution regarding criterion 6:**

The peers appreciate that the Faculty of Medicine will include a student representative in the curriculum committee. In addition, the peers stress that it is also necessary to close the feedback loops and to inform the students about the results of the teaching evaluations.

The peers consider the criterion to be mostly fulfilled.

## **D Additional Documents**

Before preparing their final assessment, the panel ask that the following missing or unclear information be provided together with the comment of the Higher Education Institution on the previous chapters of this report:

- none

## **E Comment of the Higher Education Institution (16.01.2020)**

UANL provides a detailed statement.

## F Summary: Peer recommendations (10.02.2020)

Taking into account the additional information and the comments given by UANL, the peers summarize their analysis and **final assessment** for the award of the seals as follows:

Degree Programme	ASIIN-seal	Subject-specific label	Maximum duration of accreditation
Ba Medical Surgeon and Obstetrician	With requirements for one year	-	30.09.2025

### Requirements

- A 1. (ASIIN 2.1) Split up the aggregated modules Medical Sciences I, II, III and Surgical Sciences I, II, III into their components and make the workload of each subject transparent.
- A 2. (ASIIN 2.1) Make sure that the degree programme comprises a thesis or final project, which ensures that students work on a set task independently and at the level aimed for.
- A 3. (ASIIN 2.2) The students' workload, especially the self-study hours, and the awarded credits are not consistent and need to be verified and adjusted.
- A 4. (ASIIN 5.1) Describe the exact form of exam in the module description and make transparent how the yes/no evaluation in the practical courses is translated into a grade.
- A 5. (ASIIN 5.2) Issue a Diploma Supplement that contains detailed information about the educational objectives, intended learning outcomes, the structure and the academic level of the degree programme as well as about the individual performance of the student. Provide statistical data according to the ECTS-Users' guide in addition to the final grade.
- A 6. (ASIIN 5.3) Make the relevant information about the MCP programme (learning outcomes, study plan, and module descriptions) available in English on the School's webpage.

- A 7. (ASIIN 6) Close the feedback loops and inform the students about the results of the teaching evaluations.

### **Recommendations**

- E 1. (ASIIN 2.1) It is recommended to further promote students' academic mobility and to establish more international exchange programmes.
- E 2. (ASIIN 1.3) It is recommended to change the English name of the degree programme into "Degree in Medicine".
- E 3. (ASIIN 2.2) It is recommended to put more effort into analysing the reasons for drop-ping out in order to be able to take appropriate measures for reducing the quota.
- E 4. (ASIIN 6) It is recommended to make a student representative a member of the curriculum committee.

## **G Comment of the Technical Committee 14 - Medicine (02.03.2020)**

*Assessment and analysis for the award of the ASIIN seal:*

It is a twelve-semester long medical degree programme with a somewhat unusual title. The curriculum corresponds to that of a standard programme in human medicine and has no particular focus on surgery or obstetrics. The peer group was composed internationally and had a very positive overall impression of the degree programme and medical education. In particular, the close cooperation with the University Hospital was praised, and the technical equipment is also very good. The seven requirements proposed by the peers are of a rather technical nature and are typical for procedures in Mexico. The Technical Committee agrees with the assessment of the peers and supports the requirements without making any changes to them. With regard to recommendation E2, the TC proposes an amendment to make it clear that the current English translation of the name of the degree programme gives rise to false associations and that in international comparison a "Medical Doctor" and not just a "Bachelor" is awarded for similar programmes. Finally, the TC is of the opinion that the UANL should pay more attention to the validity and reliability of the examination forms and methods used and therefore proposes an additional recommendation (E5).

The Technical Committee 14 – Medicine recommends the award of the seals as follows:

<b>Degree Programme</b>	<b>ASIIN-seal</b>	<b>Subject-specific label</b>	<b>Maximum duration of accreditation</b>
Ba Medical Surgeon and Obstetrician	With requirements for one year	-	30.09.2025

### **Recommendations**

- E 2. (ASIIN 1.3) It is recommended to change the English name of the degree programme into an internationally recognised name and to award a "Medical Doctor".
- E 5. (ASIIN 3) It is recommended to document and evaluate the reliability and validity of assessment methods, to incorporate new assessment methods where appropriate, and to use blueprints.

## H Decision of the Accreditation Commission (20.03.2020)

*Assessment and analysis for the award of the ASIIN seal:*

The Accreditation Commission discusses about the procedure and decides to follow the suggestions of the Technical Committee 14 – Medicine.

The Accreditation Commission for Degree Programmes decides to award the following seals:

<b>Degree Programme</b>	<b>ASIIN-seal</b>	<b>Subject-specific label</b>	<b>Maximum duration of accreditation</b>
Ba Medical Surgeon and Obstetrician	With requirements for one year	-	30.09.2025

### Requirements

- A 1. (ASIIN 2.1) Split up the aggregated modules Medical Sciences I, II, III and Surgical Sciences I, II, III into their components and make the workload of each subject transparent.
- A 2. (ASIIN 2.1) Make sure that the degree programme comprises a thesis or final project, which ensures that students work on a set task independently and at the level aimed for.
- A 3. (ASIIN 2.2) The students' workload, especially the self-study hours, and the awarded credits are not consistent and need to be verified and adjusted.
- A 4. (ASIIN 5.1) Describe the exact form of exam in the module description and make transparent how the yes/no evaluation in the practical courses is translated into a grade.
- A 5. (ASIIN 5.2) Issue a Diploma Supplement that contains detailed information about the educational objectives, intended learning outcomes, the structure and the academic level of the degree programme as well as about the individual performance of the student. Provide statistical data according to the ECTS-Users' guide in addition to the final grade.

- A 6. (ASIIN 5.3) Make the relevant information about the MCP programme (learning outcomes, study plan, and module descriptions) available in English on the School's webpage.
- A 7. (ASIIN 6) Close the feedback loops and inform the students about the results of the teaching evaluations.

### **Recommendations**

- E 1. (ASIIN 2.1) It is recommended to further promote students' academic mobility and to establish more international exchange programmes.
- E 2. (ASIIN 1.3) It is recommended to change the English name of the degree programme into an internationally recognised name and to award a "Medical Doctor".
- E 3. (ASIIN 2.2) It is recommended to put more effort into analysing the reasons for drop-ping out in order to be able to take appropriate measures for reducing the quota.
- E 4. (ASIIN 6) It is recommended to make a student representative a member of the curriculum committee.
- E 5. (ASIIN 3) It is recommended to document and evaluate the reliability and validity of assessment methods, to incorporate new assessment methods where appropriate, and to use blueprints.

# Appendix: Programme Learning Outcomes and Curriculum

According to the Self-Assessment Report, the following **objectives** and **learning outcomes (intended qualifications profile)** shall be achieved by the Bachelor's degree programme Medical Surgeon and Obstetrician:

## General skills

### Instrumental skills

1. To apply autonomous learning strategies in the different levels and fields of knowledge that allow them to make timely and relevant decisions in the personal, academic and professional spheres.
2. Use logical, formal, mathematical, iconic, verbal and non-verbal languages according to their stage of life, to understand, interpret and express ideas, feelings, theories and currents of thought with an ecumenical approach.
3. Manage information and communication technologies as a tool for access to information and its transformation into knowledge, as well as for learning and collaborative work with cutting-edge techniques that allow constructive participation in society.
4. Master their mother tongue in oral and written form with correctness, relevance, opportunity and ethics adapting their message to the situation or context, for the transmission of scientific ideas and findings.
5. Use logical, critical, creative and proactive thinking to analyse natural and social phenomena that allow you to make relevant decisions in your sphere of influence with social responsibility.
6. Use a second language, preferably English, with clarity and correctness to communicate in everyday contexts, academic, professional and scientific.
7. To elaborate inter, multi and transdisciplinary academic and professional proposals according to the best world practices in order to promote and consolidate collaborative work.
8. To use traditional and cutting-edge research methods and techniques for the development of their academic work, the exercise of their profession and the generation of knowledge.

### Personal and social interaction skills

9. Maintain an attitude of commitment and respect for the diversity of social and cultural practices that reaffirm the principle of integration in the local, national and international context in order to promote environments of peaceful coexistence.
10. Intervene against the challenges of contemporary society at the local and global level with a critical attitude and human, academic and professional commitment to contribute to consolidating general welfare and sustainable development.

11. Practice the values promoted by UANL: truth, equity, honesty, freedom, solidarity, respect for life and others, peace, respect for nature, integrity, ethical behaviour and justice, in their personal and professional environment to contribute to building a sustainable society.

### **Integrative Competencies**

12. Build innovative proposals based on a holistic understanding of reality to help overcome the challenges of the interdependent global environment.
13. Assume leadership committed to social and professional needs to promote relevant social change.
14. Resolve personal and social conflicts in accordance with specific academic and professional techniques for appropriate decision-making.
15. Achieve the adaptability required by the social and professional environments of uncertainty of our time to create better living conditions.

### **Specific skills**

#### **Scientific Basis of Medicine**

1. To use the scientific foundations of medicine considering the economic, psychological, social, cultural and environmental factors that contribute to the development and evolution of the disease for medical decisions and actions.

#### **Professional Clinical Practice**

2. To solve clinical problems through deductive reasoning, interpretation of findings and definition of their nature in order to make decisions and determine principles of action of medical practice to be followed in a responsible manner, impacting on individual and collective health.
3. Evaluate the development and evolution of the disease through the analysis of biomedical information and related physical, social and cultural factors, promoting health education and promoting preventive medicine.
4. Appropriately manage patients with the most frequent diseases, from a biopsychosocial perspective, through the application of knowledge, technical procedures and basic diagnoses, based on clinical guidelines and protocols of care, to solve the main health problems of the first level of care of the individual and the community.
5. Manage common medical emergencies, applying treatment, procedures and minor interventions and refer in an appropriate and timely manner to patients who require critical care for the preservation of life.
6. To apply treatment, procedures and minor interventions and to refer in an appropriate and timely manner patients who require critical care for the preservation of life.
7. Manage human resources, diagnostic interventions, therapeutic modalities and health care options according to national standards, promoting a culture of quality care and ensuring patient safety.

#### **Critical Thinking and Research**

8. To apply the scientific method in the resolution of medical problems with an innovative, analytical and self-critical attitude in the prevention, diagnosis and treatment of diseases.

### **Professional Values and Ethics**

9. Integrate professional values and ethics into medical practice, without distinction of gender, race, political and sexual preferences, religious beliefs, activities performed, different abilities or socioeconomic status, promoting social inclusion and contributing to the well-being of the population, quality of life and human development.
10. Respect the integrity of the patient, preserving his/her medical information as a fundamental part of professional secrecy, in order to protect his/her rights.

### **Organizational Work**

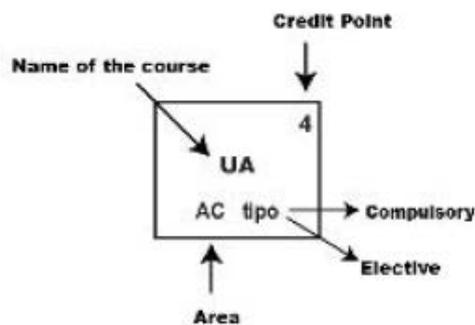
11. Promote the culture of organizational work in the field of health, recognizing multidisciplinary work, respect for institutional policies and observance of regulations, in order to contribute to the comprehensive treatment of patients.

### **Communication**

12. Apply the principles of effective communication by establishing a relationship of respect and empathy with the patient, his or her family, the community and other health professionals in order to use the information appropriately.

The following curriculum is presented:

Semester					
1	2	3	4	5	6
7 <b>Embryology</b> ACFB ob	12 <b>Human Anatomy</b> ACFB ob	8 <b>Physiology</b> ACFB ob	8 <b>Microbiology</b> ACFB ob	8 <b>Pathology</b> ACFP-F ob	13 <b>Medical Propedeutics</b> ACFP-F ob
9 <b>Biochemistry and Molecular Biology</b> ACFB ob	7 <b>Tissue and Cell Biology</b> ACFB ob	3 <b>Bioethics</b> ACFB ob	3 <b>Immunology</b> ACFB ob	3 <b>Basic Clinical Integration II</b> ACFP-F ob	7 <b>Pharmacology and Toxicology</b> ACFP-F ob
3 <b>Introduction to Medicine</b> ACFB ob	4 <b>Basic Clinical Integration I</b> ACFB ob	3 <b>Genetics</b> ACFB ob	3 <b>Research Methodology in Health Sciences</b> ACFB ob	4 <b>Imaging</b> ACFP-F ob	3 <b>Clinical Pathology</b> ACFP-F ob
2 <b>Leadership, Entrepreneurship, and Innovation</b> ACFGU ob	2 <b>Social Responsibility and Sustainable Development</b> ACFGU ob	2 <b>Ethics and Culture of Legality</b> ACFGU ob	3 <b>Biostatistics</b> ACFB ob	3 <b>Quality and Safety in Health Care</b> ACFP-F ob	3 <b>Elective IV</b> ACF GU-MCP op
3 <b>Elective I</b> ACF GU-MCP op	3 <b>Elective II</b> ACF GU-MCP op	4 <b>Elective I</b> ACFB op	5 <b>Preventive Medicine</b> ACFB ob	3 <b>Forensic Medicine</b> ACFP-F ob	4 <b>Elective II</b> ACFP-F op
		3 <b>Elective III</b> ACF GU-MCP op	2 <b>Peace Culture</b> ACFB ob	4 <b>Elective I</b> ACFP-F op	
			3 <b>Elective II</b> ACFB op		

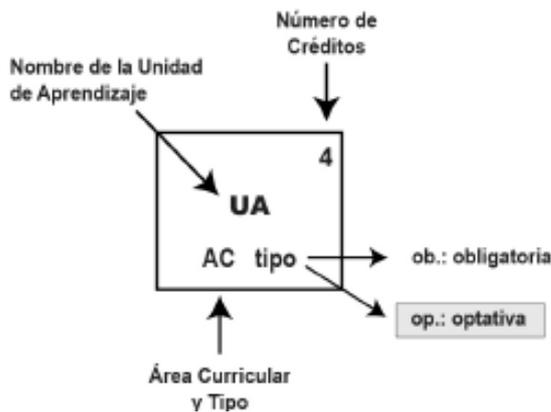


7	8	9	10	11	12
24 Medical Sciences I ACFP-I ob	21 Surgical Sciences I ACFP-I ob	27 Medical Sciences II ACFP-I ob	24 Surgical Sciences II ACFP-I ob	8 Medical Sciences III ACFP-I ob	5 Surgical Sciences III ACFP-I ob
6 Family Medicine ACFP-I ob	8 Epidemiology and Public Health ACFP-I ob		6 Psychiatry ACFP-I ob	22 Gynecology and Obstetrics ACFP-I ob	12 Emergencies ACFP-I ob
				4 Medical Therapeutics ACFP-I ob	15 Pediatrics ACFP-I ob

- A** **ACFB:** **BASIC**
- A** **ACFP-F:** **ESSENTIAL PROFESIONAL**
- A** **ACFP-I:** **INTEGRATIVE PROFESIONAL**
- A** **ACFGU:** **GENERAL STUDIES**
- A** **ACFGU-MCP:** **GENERAL STUDIES MCP**

The following curriculum is presented:

Semestre					
1	2	3	4	5	6
7 <b>Embriología</b> ACFB ob	12 <b>Anatomía Humana</b> ACFB ob	8 <b>Fisiología</b> ACFB ob	8 <b>Microbiología</b> ACFB ob	8 <b>Patología</b> ACFP-F ob	13 <b>Propedéutica Médica</b> ACFP-F ob
9 <b>Bioquímica y Biología Molecular</b> ACFB ob	7 <b>Biología Celular y Tisular</b> ACFB ob	3 <b>Bioética</b> ACFB ob	3 <b>Inmunología</b> ACFB ob	3 <b>Integración Básico Clínica II</b> ACFP-F ob	7 <b>Farmacología y Toxicología</b> ACFP-F ob
3 <b>Introducción a la Medicina</b> ACFB ob	4 <b>Integración Básico Clínica I</b> ACFB ob	3 <b>Genética</b> ACFB ob	3 <b>Metodología de la Investigación en Ciencias de la Salud</b> ACFB ob	4 <b>Imagenología</b> ACFP-F ob	3 <b>Patología Clínica</b> ACFP-F ob
2 <b>Liderazgo, Emprendimiento e Innovación</b> ACFGU ob	2 <b>Responsabilidad Social y Desarrollo Sustentable</b> ACFGU ob	2 <b>Ética y Cultura de la Legalidad</b> ACFGU ob	3 <b>Bioestadística</b> ACFB ob	3 <b>Calidad y Seguridad en la atención de la Salud</b> ACFP-F ob	3 <b>Optativa IV</b> ACF GU-MCP op
3 <b>Optativa I</b> ACF GU-MCP op	3 <b>Optativa II</b> ACF GU-MCP op	4 <b>Optativa I</b> ACFB op	5 <b>Medicina Preventiva</b> ACFB ob	3 <b>Medicina Forense</b> ACFP-F ob	4 <b>Optativa II</b> ACFP-F op
		3 <b>Optativa III</b> ACF GU-MCP op	2 <b>Cultura de Paz</b> ACFB ob	4 <b>Optativa I</b> ACFP-F op	
			4 <b>Optativa II</b> ACFB op		



7	8	9	10	11	12
24 Ciencias Médicas I ACFP-I ob	21 Ciencias Quirúrgicas I ACFP-I ob	24 Ciencias Médicas II ACFP-I ob	24 Ciencias Quirúrgicas II ACFP-I ob	10 Ciencias Médicas III ACFP-I ob	5 Ciencias Quirúrgicas III ACFP-I ob
6 Medicina Familiar ACFP-I ob	8 Epidemiología y Salud Pública ACFP-I ob	5 Terapéutica Médica ACFP-I ob	6 Psiquiatría ACFP-I ob	22 Ginecología y Obstetricia ACFP-I ob	12 Urgencias ACFP-I ob
					15 Pediatría ACFP-I ob

- A** **ACFB:** Área Curricular de Formación Básica
- A** **ACFP-F:** Área Curricular de Formación Profesional Fundamental
- A** **ACFP-I:** Área Curricular de Formación Profesional Integradora (Internado Rotatorio de Pregrado)
- A** **ACFGU:** Área Curricular de Formación General Universitaria
- A** **ACFGU-MCP:** Área Curricular de Formación General Universitaria. Médico Cirujano y Partero

**A ACFB:** Área Curricular de Formación Básica

Optativa I	
Introducción a la Salud Mental	Sem. 3
Estrategias de Promoción para la Salud	Sem. 3

Optativa II	
Medicina del Trabajo	Sem. 4
Medicina del Deporte y Rehabilitación	Sem. 4
Medicina Genómica	Sem. 4

**A ACFP-F:** Área Curricular de Formación Profesional Fundamental

Optativa I	
Transplantes de Órganos y Tejidos	Sem. 5
Sexualidad	Sem. 5
Principios de Técnicas Quirúrgicas	Sem. 5
Medicina Complementaria	Sem. 5

Optativa II	
Seminarios de Introducción a la Medicina Interna	Sem. 6
Anestesia y Manejo del Dolor	Sem. 6
Cuidados Paliativos	Sem. 6

**A ACFGU-MCP:** Área Curricular de Formación General Universitaria. Médico Cirujano y Partero

Optativa I	
Aplicación de las Tecnologías de la Información y la Comunicación en Salud	Sem. 1
Estrategias y Hábitos de Estudio en Ciencias de la Salud	Sem. 1
Habilidades de la Comunicación	Sem. 1

Optativa II	
Aplicación de las Tecnologías de la Información y la Comunicación en Salud	Sem. 2
Estrategias y Hábitos de Estudio en Ciencias de la Salud	Sem. 2
Habilidades de la Comunicación	Sem. 2

Optativa III	
Inglés	Sem. 3
Inglés Técnico	Sem. 3
Lengua Extranjera	Sem. 3

Optativa IV	
Inglés	Sem. 4
Inglés Técnico	Sem. 4
Lengua Extranjera	Sem. 4